FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		NIZATION	
	(See in	structions)	Office use only
NAME OF COMMITTEE (in	full) (Check if no is changed)		12FE4M5
Ashland Inc.	Political Action Committee	for Employees (PACE)	<u> </u>
ADDRESS (number and	street) 50 East RiverO	Center Boulevard	
(Check if add is changed)	ress Covington		KY
OOMMITTEEIO E MA	ADDDESO	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA			
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
COMMITTEE'S FAX	NUMBER		
با لبنا			
2. DATE M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	ATION NUMBER	C C00075994	
4. IS THIS STATE!	MENT NEW (N)	OR X AMENDED (A)
I certify that I have exam	nined this Statement and to the best o	f my knowledge and belief it is true, corre	ect and complete
Type or Print Name of	Treasurer Rebecca G	Gumm	
Signature of Treasure	r Electronically Filed by Reb	ecca Gumm	Date 12 / 21 / 2006
NOTE: Submission of fa	·	ation may subject the person signing this	Statement to the penalties of 2 U.S.C. S437g.
Office Use Only		For further informate Federal Election Control Free 800-424-95	nmission FEC FORM 1 530 (Revised 02/2003)

	FECForm 1 (Revised 02/2003)	Page 2				
5.	TYPE OF COMMITTEE (Check One)					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate					
	Party Affiliation Sought: House Senate President	State				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
		ocratic, blican,etc.) Party. or party				
ŝ.	Name of Any Connected Organization or Affiliated Committee					
	Ashland					
	Mailing Address					
	CITY▲ STATE▲ ZII	CODE A				
	Relationship					
	Type of Connected Organization:					
	X Corporation Corporation w/o Capital Stock Labor Organization					
	Membership Organization Trade Association Cooperative					

	n 1 (Revised 02/2003)			Page 3
Write or Type Con		ammittae for Employees (DACE	.	
7. Custodian of		name, address, (phone number nd records.	•	e person in
Full Name				
Mailing Addres				
Title or Position		CITY A		
			Telephone number	
			•	
Full Name of Treasurer	Rebecca Gumr	n		
		n PO Box 391		
of Treasurer			KY	41114
of Treasurer		PO Box 391	KYSTATE▲	41114 ZIP CODE ▲
of Treasurer Mailing Addres		PO Box 391 Ashland CITY A		
of Treasurer Mailing Addres	n ♥	PO Box 391 Ashland CITY A	STATE ▲	ZIP CODE A
of Treasurer Mailing Addres Title or Position Full Name of Designated	Treasurer Brenda Anders	PO Box 391 Ashland CITY A	STATE ▲	ZIP CODE A
of Treasurer Mailing Addres Title or Position Full Name of Designated Agent	Treasurer Brenda Anders	PO Box 391 Ashland CITY A	STATE ▲	ZIP CODE A
of Treasurer Mailing Addres Title or Position Full Name of Designated Agent	Treasurer Brenda Anders	PO Box 391 Ashland CITY A	STATE ▲	ZIP CODE A

Telephone number

Assistant Treasurer

	FEC Form 1 (Revised 02	2/2003)	Page 4						
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.								
	Peoples Mailing Address	s Bank 900 Diederich Boulevard							
		Russell KY 4116	69						

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$

CITY 🗷